PTC/SB/22 (06-05)

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. = 1	ITION FOR EXTENSION OF TIME UNI	DER 37 CFR 1.136(a).	Docket Number (	Optional) NEXQ-24,727	1	
		in re Application of Jay	B. Ross et al.		· · · · · · · · · · · · · · · · · · ·	
	•	Application Number 09/3	89,567	Filed 09/03/99	ECEIVED	
		For Universal Serial Bit Stream Processor C		CENTRAL FAX CENTE		
		Art Unit 2761	Examiner I	Richard Ellis	SEP 1 5 2004	
	is a request under the provisions of 37 CFR cation.	1.136(a) to extend the perio	i for filing a reply	In the above identified	, 521 1.3 2004	
The	requested extension and appropriate non-sn	nali-entity fee are as follows	check time perio	d desired):		
	One month (37 CFR 1.17(a)(1))			\$	<del></del>	
	Two months (37 CFR 1.17(a)(2))		·	s 420.00		
	Three months (37 CFR 1.17(a)(3))		*	\$	<b></b>	
	Four months (37 CFR 1.17(a)(4))			\$		
	Five months (37 CFR 1.17(a)(5))			\$		
	Applicant claims small entity status. See 37 half, and the resulting fee is: \$ 210.00	CFR 1.27. Therefore, the fe	e amount shown	above is reduced by	o <del>ne-</del>	
$\Box$	A check in the amount of the fee is enclosed.					
<u></u>	Payment by credit card. Form PTO-2038 is attached.				ŀ	
	The Director has already been authorized to charge fees in this application to a Deposit Account.				ļ	
Ø	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-0780/OGPT-24,727				nent,	
	I have enclosed a duplicate copy of this sheet.					
	I am the applicant/inventor.	•				
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				İ	
	attorney or agent of record. Registration Number 45,337				İ	
	attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a)					
	WARNING: Information on this form may on this form. Provide credit card informa-			i not be included		
•	Markan 9/15/04	Da	rd C Co	iure .		
	972-479-0462	David C.	Cain			
	Telephone Number		Typed or pri	nted name		
NOTE	: \$ignatures of all the inventors or essignees of record of use is required, see below.	the entire interest or their represent	silve(s) are required. S	Submit multiple forms if more	210.00 GP	
	Total of for	ns are submitted.	•		7 939 557 510°	

including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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